GOLDEN YEARS HEALTH CARE CENTER

WALWORTH 53184 Phone: (262) 275-6103	3	Ownership:	Corporation
Operated from 1/1 To 12/31 Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	Yes
Number of Beds Set Up and Staffed (12/31/03):	28	Title 18 (Medicare) Certified?	No
Total Licensed Bed Capacity (12/31/03):	28	Title 19 (Medicaid) Certified?	No
Number of Residents on 12/31/03:	22	Average Daily Census:	26

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents	(12/31/03)	Length of Stay (12/31/03)	%
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis		Age Groups	용 		13.6 72.7
Supp. Home Care-Household Services	No No	Developmental Disabilities	0.0	Under 65	0.0 9.1	More Than 4 Years	9.1
Day Services Respite Care	No	Mental Illness (Org./Psy) Mental Illness (Other)	9.1	65 - 74 75 - 84	22.7	•	95.5
Adult Day Care Adult Day Health Care	No No	Alcohol & Other Drug Abuse Para-, Quadra-, Hemiplegic		85 - 94 95 & Over		************************************	
Congregate Meals Home Delivered Meals	No No	Cancer Fractures	0.0 4.5	'		Nursing Staff per 100 Res: (12/31/03)	
Other Meals	No	Cardiovascular	9.1	65 & Over	100.0	i	
Transportation Referral Service	No No	Cerebrovascular Diabetes			 %	RNs LPNs	20.5 5.8
Other Services	No	Respiratory Other Medical Conditions				Nursing Assistants,	40.3
Provide Day Programming for Mentally Ill	No	Other Medical Conditions		Male Female	77.3	Aides, & Orderlies	40.3
Provide Day Programming for Developmentally Disabled	No	 	100.0	 	100.0	 	
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Method of Reimbursement

		edicare itle 18			dicaid tle 19			Other		:	Private Pay	:		amily Care			anaged Care			
Level of Care	No.	olo	Per Diem (\$)	No.	00	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	엉	Per Diem (\$)	No.	00	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	3	13.6	141	0	0.0	0	0	0.0	0	3	13.6
Intermediate				0	0.0	0	0	0.0	0	7	31.8	134	0	0.0	0	0	0.0	0	7	31.8
Limited Care				0	0.0	0	0	0.0	0	6	27.3	127	0	0.0	0	0	0.0	0	6	27.3
Personal Care				0	0.0	0	0	0.0	0	5	22.7	120	0	0.0	0	0	0.0	0	5	22.7
Residential Care				0	0.0	0	0	0.0	0	1	4.5	105	0	0.0	0	0	0.0	0	1	4.5
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		0	0.0		0	0.0		22	100.0		0	0.0		0	0.0		22	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/03
Deaths During Reporting Terrou					% Needing		Total
Percent Admissions from:	į	Activities of	96	As	sistance of	% Totally	Number of
Private Home/No Home Health	22.2	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0		63.6	36.4	22
Other Nursing Homes	3.7	Dressing	18.2		50.0	31.8	22
Acute Care Hospitals	63.0	Transferring	22.7		59.1	18.2	22
Psych. HospMR/DD Facilities	0.0	Toilet Use	22.7		54.5	22.7	22
Rehabilitation Hospitals	0.0	Eating	72.7		4.5	22.7	22
Other Locations	11.1	******	*****	*****	*****	******	*****
otal Number of Admissions	27	Continence		용	Special Treatmen	ts	%
ercent Discharges To:	1	Indwelling Or Extern	nal Catheter	0.0	Receiving Resp	iratory Care	4.5
Private Home/No Home Health	6.3	Occ/Freq. Incontiner	nt of Bladder	68.2	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	3.1	Occ/Freq. Incontiner	nt of Bowel	22.7	Receiving Suct	ioning	0.0
Other Nursing Homes	3.1				Receiving Osto	my Care	0.0
Acute Care Hospitals	56.3	Mobility			Receiving Tube	Feeding	0.0
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	0.0	Receiving Mech	anically Altered Diets	31.8
Rehabilitation Hospitals	0.0						
Other Locations	9.4	Skin Care			Other Resident C	haracteristics	
Deaths	21.9	With Pressure Sores		0.0	Have Advance D	irectives	100.0
otal Number of Discharges	į	With Rashes		0.0	Medications		
(Including Deaths)	32				Receiving Psyc	hoactive Drugs	50.0

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

		Owne	ership:	Bed	Size:	Lic	ensure:				
	This	Pro	prietary	Und	er 50	Ski	lled	Al	1		
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities		
	%	૪	Ratio	%	Ratio	%	Ratio	8	Ratio		
Occupancy Rate: Average Daily Census/Licensed Beds	92.9	84.6	1.10	80.3	1.16	88.1	1.05	87.4	1.06		
Current Residents from In-County	86.4	75.5	1.14	75.6	1.14	69.7	1.24	76.7	1.13		
Admissions from In-County, Still Residing	11.1	18.9	0.59	26.7	0.42	21.4	0.52	19.6	0.57		
Admissions/Average Daily Census	103.8	152.9	0.68	109.6	0.95	109.6	0.95	141.3	0.73		
Discharges/Average Daily Census	123.1	154.8	0.79	108.9	1.13	111.3	1.11	142.5	0.86		
Discharges To Private Residence/Average Daily Census	11.5	63.8	0.18	28.0	0.41	42.9	0.27	61.6	0.19		
Residents Receiving Skilled Care	13.6	94.6	0.14	77.5	0.18	92.4	0.15	88.1	0.15		
Residents Aged 65 and Older	100	93.7	1.07	92.5	1.08	93.1	1.07	87.8	1.14		
Title 19 (Medicaid) Funded Residents	0.0	66.0	0.00	52.5	0.00	68.8	0.00	65.9	0.00		
Private Pay Funded Residents	100	19.0	5.25	41.3	2.42	20.5	4.87	21.0	4.77		
Developmentally Disabled Residents	0.0	0.5	0.00	0.6	0.00	0.5	0.00	6.5	0.00		
Mentally Ill Residents	40.9	31.3	1.31	40.0	1.02	38.2	1.07	33.6	1.22		
General Medical Service Residents	13.6	23.7	0.57	14.4	0.95	21.9	0.62	20.6	0.66		
Impaired ADL (Mean)	50.9	48.4	1.05	47.9	1.06	48.0	1.06	49.4	1.03		
Psychological Problems	50.0	50.1	1.00	56.9	0.88	54.9	0.91	57.4	0.87		
Nursing Care Required (Mean)	4.5	6.6	0.69	6.0	0.76	7.3	0.62	7.3	0.62		